Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Eastern District of Michigan	
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your	Steven First name L	First name
	driver's license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Goward Last name	Last name
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden	First name	First name
	names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
•	Only the last 4 digits of your		
٥.	Social Security number or	xxx-xx- <u>0</u> <u>2</u> <u>4</u> <u>3</u>	xxx-xx
	federal Individual Taxpayer Identification number	OR	OR
	(ITIN)	9xx - xx	9xx - xx

Debtor 1 Steven Goward Case number (if known) _

Last Name

Middle Name

First Name

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names and Employer Identification ✓ I have not used any business names or EINs. ■ I have not used any business names or EINs. Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and doing business as names Business name Business name EIN EIN EIN If Debtor 2 lives at a different address: Where you live 18134 West Sharon Road Number Street Number Street Oakley, MI 48649 State ZIP Code City ZIP Code City State Saginaw County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from the one it in here. Note that the court will send any notices to you at above, fill it in here. Note that the court will send any notices this mailing address. to you at this mailing address. Number Street Number Street P.O. Box P.O. Box City ZIP Code ZIP Code State City State Why you are choosing this Check one: Check one: district to file for bankruptcy ☑ Over the last 180 days before filing this petition, I have Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. lived in this district longer than in any other district. ☐ I have another reason. Explain. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408) (See 28 U.S.C. § 1408)

Debtor 1 Steven

Official Form 101

Case number (if known) ____ Middle Name First Name Last Name Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box. Code you are choosing to file Chapter 7 under Chapter 11 Chapter 12 Chapter 13 How you will pay the fee ☐ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. ☑ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). ☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. **✓**No. Have you filed for bankruptcy ☐Yes. District ___ within the last 8 years? MM / DD / YYYY When District Case number MM / DD / YYYY When Case number MM / DD / YYYY **M**No. 10. Are any bankruptcy cases ☐Yes. Debtor ___ pending or being filed by a Relationship to you spouse who is not filing this When case with you, or by a business Case number, if known _____ District partner, or by an affiliate? MM / DD / YYYY Debtor Relationship to you District When Case number, if known MM / DD / YYYY No. Go to line 12. 11. Do you rent your residence? Yes. Has your landlord obtained an eviction judgment against you? No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part

Goward

of this bankruptcy petition.

Deb		ven t Name	L Middle	Name	Goward Last Name		_	Case number (if known).		
Dan	t 2 - Danant Ala	aut Amu Duain		Va 0	a Cala Dr					
Par	t 3: Report Abo	out Any Busin			a Sole Pr	oprietor				
12.	Are you a sole pr			o. Go to Part 4. s. Name and loo	cation of husi	ness				
	A sole proprietorsh		<u> </u>	s. Name and loo	alion oi busi	11635				
	you operate as an inot a separate legal a corporation, parti	ndividual, and is all entity such as	Na	me of business,	if any				_	
	If you have more the proprietorship, use	an one sole a separate	Nu	ımber Stre	eet				_	
	sheet and attach it	to this petition.							_	
			Cit	ty			State	ZIP Code		
			_			lescribe your busines				
						defined in 11 U.S.C.				
				-		as defined in 11 U.S.				
			_	`		11 U.S.C. § 101(53A	•			
						ned in 11 U.S.C. § 10)1(6))			
				None of the al	oove					
13.	Are you filing und of the Bankruptor you a small busing For a definition of sidebtor, see 11 U.S.	y Code and are less debtor?	deadlin operation	nes. If you indications, cash-flow sol.C. § 1116(1)(B)	te that you ar tatement, an	e a small business de d federal income tax i	ebtor, you must a	a small business debtor so attach your most recent bal of these documents do not e	ance sheet,	statement of
	,	3 2 (3)	☐ No	o. I am filing Bankrupt		oter 11, but I am NOT	a small busines	ss debtor according to the	definition in	the
			☐ Ye	s. I am filing Code.	g under Chap	oter 11 and I am a sm	all business deb	otor according to the definit	ion in the Ba	ankruptcy
Par	t 4: Report if Y	′ou Own or Ha	ıve An	y Hazardous	s Property	or Any Property	/ That Need:	s Immediate Attenti	on	
			☑ No).						
14.	Do you own or ha property that pos alleged to pose a	ses or is threat of	☐ Ye	s. What is the	hazard? _					
	imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			If immediat	e attention is	needed, why is it nee	ded?			
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		or livestock that uilding that		Where is th	e property?	Number Stree	et			
						City		State	Z	IP Code

Steven Goward Case number (if known)

First Name

Middle Name

Last Name

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

l certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit

counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Steven Goward Case number (if known).

Last Name

Middle Name

First Name

Part 6: Answer These Questions for Reporting Purposes 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by 16. What kind of debts do you an individual primarily for a personal, family, or household purpose." have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. $\mathbf{\Lambda}$ 17. Are you filing under Chapter 7? No. I am not filing under Chapter 7. Go to line 18. Do you estimate that after any Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative exempt property is excluded expenses are paid that funds will be available to distribute to unsecured creditors? and administrative expenses ☐ No are paid that funds will be available for distribution to ☐ Yes unsecured creditors? **1** 1-49 **1** 50-99 1,000-5,000 5,001-10,000 25,001-50,000 50,000-100,000 □ 100-199 □ 200-999 18. How many creditors do you 10.001-25.000 ☐ More than 100,000 estimate that you owe? \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you estimate \$50,001-\$100,000 ■ \$10,000,001-\$50 million \$1,000,000,001-\$10 billion your assets to be worth? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion More than \$50 billion \$500,001-\$1 million \$100,000,001-\$500 million \$1,000,001-\$10 million \$500,000,001-\$1 billion \$0-\$50.000 20. How much do you estimate \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Steven L Goward Steven L Goward, Debtor 1 Executed on 01/09/2019 MM/ DD/ YYYY

Debtor 1	Steven	L	Goward	Case number (if known)
	First Name	Middle Name	Last Name	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ James L Gutting	Date <u>01/09/2019</u>
James L Gutting, Attorney	MM / DD / YYYY
James I. Cutting	
James L Gutting Printed name	
Law Offices of James L Gutting Firm name	
-iiii name	
601 West Corunna Ave. A	
Number Street	
Number Street Corunna	MI 48817-1378
Number Street Corunna	MI 48817-1378 State ZIP Code
Number Street Corunna	
Number Street Corunna City	State ZIP Code
Number Street Corunna City	
	State ZIP Code

Fill in this information t	o identify your case a	and this filing:		
Debtor 1	Steven	L	Goward	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		Ea	astern District of Michigan	
Case number				
Case Hullibel				

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

1.		Land, or Other Real Estate You Own or Hain any residence, building, land, or similar property?		
		What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured cla amount of any secured cla Creditors Who Have Clair	
	Oakley, MI 48649 City State ZIP Code Saginaw County	 ☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land ☐ Investment property ☐ Timeshare ☐ Other 	Current value of the entire property? \$104,200.00 Describe the nature of you as fee simple, tenancy by testate), if known.	Current value of the portion you own? \$104,200.00 ur ownership interest (such the entireties, or a life
	•	Who has an interest in the property? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Fee Simple Check if this is comme (see instructions)	unity property
	Add the dollar value of the portion you own for all you have attached for Part 1. Write that number he	At least one of the debtors and another of your entries from Part 1, including any entries for re	` _	\$104,200.00

otor 1	Steven	L	Goward	Case number (if known)	
	First Name	Middle Name	e Last Name		
t 2: Des	scribe Your Vel	hicles			
			t in any vehicles, whether they are registered or not? e, also report it on Schedule G: Executory Contracts and		
wii iilai so	omeone else unves	s. Il you lease a verilcie	e, also report it orr scriedule G. Executory Contracts and	i Oriexpireu Leases.	
	s, trucks, tractors,	sport utility vehicles	, motorcycles		
☑ No ☑ Yes					
_		0.			
3.1 Make:		Chevy	Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cla amount of any secured cla	
Model	l:	Cavalier	Debtor 2 only	Creditors Who Have Clair	
Year:		1999	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
Approx	ximate mileage:	150000	At least one of the debtors and another	entire property? \$200.00	portion you own? \$200.00
	information:		Check if this is community property (see	Ψ200.00	φ200.0
			instructions)		
		J			
ou own or	r have more than o	ne, list here:			
.2 Make:		Pontiac	Who has an interest in the property? Check one.	Do not deduct secured cla	
Model	:	Grand Am	Debtor 1 only Debtor 2 only	amount of any secured claim Creditors Who Have Claim	
Year:		2002	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	ximate mileage:	190000	At least one of the debtors and another	entire property?	portion you own?
	information:		☐ Check if this is community property (see	\$500.00	\$500.0
Outer	miornation.		instructions)		
	, ,	,	her recreational vehicles, other vehicles, and accesso		
	: Boats, trailers, mo	otors, personal water	craft, fishing vessels, snowmobiles, motorcycle accesso	pries	
☑ No ☐ Yes					
	lallar value of the	nortion you own for	all of your entries from Bort 2 including any entries	for nages	
			all of your entries from Part 2, including any entries in here	. •	\$700.00
					L
			ale alel Marie		
t 3: Des	scribe Your Per	rsonal and House	ehold Items		
you own o	or have any legal o	or equitable interest	in any of the following items?		Current value of the
					portion you own? Do not deduct secured
					claims or exemptions.
lousehold	d goods and furn	ishings			
			. 15.1		
Examples:	Major appliances	s, furniture, linens, ch	ina, kitchenware		
No No	Major appliance:	s, furniture, linens, ch			\$5,000.00

Deb	tor 1	Steven	L	Goward	Case number (if known)	
		First Name	Middle Name	Last Name		
7.	Electronics Examples:	Televisions and		o, and digital equipment; comput ameras, media players, games	ers, printers, scanners; music collections;	
	□ Na					
	∐ No √ Yaa Da	!	Smartphone			\$100.00
	Yes. Des	scribe				
8.	Collectibles	s of value				
	Examples:			other artwork; books, pictures, o		
	_	stamp, coin, or b	paseball card collections; o	ther collections, memorabilia, co	llectibles	
	√ No					
	Yes. Des	scribe				
•	F	6				
9.		for sports and h				
	•		phic, exercise, and other h musical instruments	obby equipment; bicycles, pool to	ables, golf clubs, skis; canoes and kayaks;	
	☑ No					
	☐ Yes. Des	scribe				
10.	Firearms					
	Examples:	Pistols, rifles, s	hotguns, ammunition, and	related equipment		
	√ No					
		escribe				
	Tes. De	escribe				
11.	Examples:		es, furs, leather coats, desi	gner wear, shoes, accessories		4000.00
	Yes. Do	escribe	John M. G.		-	\$200.00
12.	Jewelry Examples:	Evendovioval		amont rings, worlding rings, boirt	oom jewelry, watches, gems, gold, silver	
	•	Everyday jewen		monthings, wedaing migs, nom		
	✓ No					
	res. De	escribe				
13.	Non-farm	animals				
	Examples:	Dogs, cats, bir	ds, horses			
	☐ No					
	Yes. Do	escribe	Cat			\$1.00
14.	Any other	personal and ho	usehold items you did no	t already list, including any hea	alth aids you did not list	
	√ No					
		escribe				
	103. D					
15.	Add the do	ollar value of all o	of your entries from Part 3	B, including any entries for page	es you have attached	
	for Part 3.	Write that numb	er here		→ _	\$5,301.00
					-	

Debtor 1 Steven Goward Case number (if known) ___ First Name Middle Name Last Name Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes...... Cash....... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ■ No **₫** Yes..... Institution name: 17.1. Checking account: United Financial Credit Union \$25.00 17.2. Checking account: 17.3. Savings account: Financial Plus Credit Union \$25.00 17.4. Savings account: United Financial Credit Union \$5.00 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **√** No ☐ Yes..... Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No

Yes. Give specific information about them.....

Debtor 1		Steven	L Goward		Case number (if known)					
		First Name	Middle Name	Last Name						
20.		-	_	able and non-negotiable ins						
	Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.									
	Yes. Give information them	about								
21.		r pension account		13(h) thrift savings accounts	or other pension or profit-sharing plans					
	□ No	itorosis iir ii va, Erd	ion, reogn, 40 r(k), 40	o(b), tillit savings accounts,	or other pension or profit sharing plans					
	Yes. List e separately	ach account								
Туре	of account:	Institution na	ame:							
401(l	k) or similar pla	n: <u>Fidelity</u>			unknown					
Pens	ion plan:	GM Pensio	on		unknown					
22.	Security depo	sits and prepayme	ents							
				you may continue service or under the continue service or under th	use from a company er), telecommunications companies, or					
	✓ No ☐ Yes									
23.	Annuities (A	contract for a period	ic payment of money to	o you, either for life or for a nu	mber of years)					
	✓ No ☐ Yes									
		n education IRA, ir 530(b)(1), 529A(b),		lified ABLE program, or und	der a qualified state tuition program.					
	No Yes									
Institu	ution name and	d description. Separ	ately file the records of	any interests. 11 U.S.C. § 52	21(c):					
25.	Trusts, equita benefit	able or future intere	ests in property (other	r than anything listed in line	1), and rights or powers exercisable for your					
	✓ No									
	Yes. Give information	n about them								
26.		_		ther intellectual property						
	Examples: I	nternet domain nam	es, websites, proceed	s from royalties and licensing	agreements					
	☐ Yes. Give	specific n about them								
27.	Licenses, fra	nchises, and other	general intangibles							
	p	Building permits, exc professional license		erative association holdings,	liquor licenses,					
	✓ No ☐ Yes. Give									
	information	n about them								

Debi	OI I	Steven	<u> </u>	Goward	Case number (if known)	\ <u></u>
		First Name	Middle Name	Last Name		
Mone	ey or prop	erty owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
						,
28.	Tay refur	nds owed to you				
20.	iax iciui	ius owed to you				
	√ No					
	Yes.	Give specific informatio	n about		Federal:	
		them, including whether				
		already filed the returns	and the		State:	
		tax years			Local:	
29.	Family s	upport				
	Examples	s: Past due or lump su	m alimonv. spousal sup	port, child support, maintenan	ce, divorce settlement, property settlement	
	,		, , .,	, , , , , , , , , , , , , , , , , , , ,	,, . , . , . , . , . , . , . ,	
	√ No					
		Give specific informatio	n			
		,			Alimony:	
					Maintenance:	
					Support:	
					Divorce settlement:	
					Divorce settlement.	
					Property settlement:	
30.	Examples No		bility insurance paymer paid loans you made to		, vacation pay, workers' compensation, Social	
31.	Examples No Yes.	in insurance policies s: Health, disability, or Name the insurance cor of each policy and list its	mpany	avings account (HSA); credit, iny name:	homeowner's, or renter's insurance Beneficiary:	Surrender or refund value:
32.	Any inter	est in property that is	due you from someon	e who has died		
	If you are		-		or are currently entitled to receive property	
	√ No					
	_	Give specific informatio	n]
		·				
						-
33.	Claims a	gainst third parties. wh	ether or not you have	filed a lawsuit or made a de	mand for payment	
				e claims, or rights to sue	- F-A	
		. Acoidonio, employii	iora dioputos, moundino	o oranno, or ngino to oue		
	√ No	December 1]
	→ Yes.	Describe each claim				
						<u>.</u>

Debt	or 1	Steven	L	Goward	Case number (if known)	
		First Name	Middle Nam	ne Last Name		
34.	to set off clai		ted claims of	every nature, including counterclaims o	f the debtor and rights	
	✓ No ☐ Yes. Des	cribe each claim				
35.	Any financial	assets you did not	already list			
	✓ No ☐ Yes. Give	specific information	n			
36.		-		Part 4, including any entries for pages y		\$55.00
Par	t 5: Descri	be Any Busines	ss-Related F	Property You Own or Have an Int	erest In. List any real estate in Pa	rt 1.
37.	Do you own o No. Go to l Yes. Go to	Part 6.	r equitable inte	erest in any business-related property?		
						Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts rec	eivable or commiss	sions you alrea	ady earned		
	✓ No ☐ Yes. Desc	ribe				
39.	Examples: E	nent, furnishings, a Business-related cor		are, modems, printers, copiers, fax machin	es, rugs, telephones, desks, chairs, electronic	devices
	✓ No ☐ Yes. Desc	ribe				
40.	Machinery, fix	tures, equipment,	supplies you ι	use in business, and tools of your trade		
	✓ No ☐ Yes. Desc	ribe				
41.	Inventory					
	✓ No ☐ Yes. Desc	ribe				
1 2.		artnerships or join	nt ventures			
	✓ No ☐ Yes. Desc	ribe				

Goward

Debtor 1

Debt	or 1	Steven	L Goward	Case number (if known) _	
		First Name	Middle Name Last Name	, ,	
43.	√ No	ts, mailing lists, or ot			
	Yes. Do y	our lists include pers	onally identifiable information (as defin	ed in 11 U.S.C. § 101(41A))?	
		No Yes. Describe			
44.	Any business	s-related property you	did not already list		
	✓ No ☐ Yes. Give information				
45.			entries from Part 5, including any entri	es for pages you have attached	\$0.00
Par			Commercial Fishing-Related Pro	operty You Own or Have an Interest In.	
46.	Do you own	or have any legal or e	quitable interest in any farm- or comm	ercial fishing-related property?	
	✓ No. Go to	Part 7.			
	Yes. Go to				
	103.0010	III IC 47 .			
					Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm animals	3			
	Examples: I	ivestock, poultry, farm-	raised fish		
	✓ No ☐ Yes				
48.	Crops—eith	er growing or harves	ted		
	√ No				
	Yes. Give information				
49.		ning equipment, impl	ements, machinery, fixtures, and tools	of trade	
	√ No				
	☐ Yes				
50.	Farm and fis	ning supplies, chemic	als, and feed		
	₫ No				
	☐ Yes				
51.	Any farm- an	d commercial fishing-	related property you did not already lis	it	
	√ No				
	Yes. Give information				

Goward

Debtor 1

Debt	or 1	Steven First Name	L Middle Name	Goward Last Name	Case number (if known	n)
	for Part 6. W	ar value of all of y rite that number	our entries from Part 6, inc	cluding any entries for pages yo	→	\$0.00
53.	Examples: S No Yes. Give information	Season tickets, co	any kind you did not alrea			
54.	Add the dolla	ar value of all of y	our entries from Part 7. W	/rite that number here	→	\$0.00
Par	t 8: List th	ne Totals of Ea	ach Part of this Form			
55.	Part 1: Total	real estate, line 2.			→	\$104,200.00
56.	Part 2: Total	vehicles, line 5		\$700.00		
57.	Part 3: Total	personal and hou	sehold items, line 15	\$5,301.00		
58.	Part 4: Total	financial assets, I	ine 36	<u>\$55.00</u>		
59.	Part 5: Total	business-related	property, line 45	\$0.00		
60.	Part 6: Total	farm- and fishing	related property, line 52	\$0.00		
61.	Part 7: Total	other property no	ot listed, line 54	+ \$0.00		
62.	Total person	al property. Add li	nes 56 through 61	\$6,056.00	Copy personal property total → +	\$6,056.00
63.	Total of all pr	roperty on Sched	u le A/B. Add line 55 + line 6	52		\$110,256.00

Fill in this information	to identify your case:			
Debtor 1	Steven	L	Goward	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		Ea	astern District of Michigan	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Ра	Part 1: Identify the Property You Claim as Exempt							
1.	✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)							
	ef description of the property and line on nedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption				
3.								

Filli	in this information to	identify your case:							
De	ebtor 1	Steven	L	Goward					
		First Name	Middle Name	Last Name					
De	ebtor 2								
(S _l	oouse, if filing)	First Name	Middle Name	Last Name					
Ur	ited States Bankrupt	tcy Court for the:	Ea	stern District of Michigan					
Ca	ise number					☐ Check if t	his is an		
(if	known)					amended	filing		
Of	ficial Form	<u>106D</u>							
Sc	hedule D	: Creditor	s Who Ha	ave Claims Secured	by Prope	rty	12/15		
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).									
1. Do	any creditors have	claims secured by ye	our property?						
	No. Check this box	and submit this form	to the court with yo	ur other schedules. You have nothing else to	report on this form.				
	Yes. Fill in all of the	e information below.							
Pai	t 1: List All Se	cured Claims							
2.				ured claim, list the creditor separately for	Column A	Column B	Column C		
		than one creditor has claims in alphabetica	•	list the other creditors in Part 2. As much the creditor's name.	Amount of claim Do not deduct the	Value of collateral that supports	Unsecured portion		

Add the dollar value of your entries in Column A on this page. Write that number here:

this claim

\$0.00

If any

value of collateral.

Debtor 1 Steven Goward Case number (if known). First Name Middle Name Last Name Column A Column B Column C Additional Page Amount of claim Value of collateral Unsecured Part 1: After listing any entries on this page, number them beginning Do not deduct the that supports portion this claim with 2.3, followed by 2.4, and so forth. value of collateral. If any \$104,200.00 Wells Fargo Home Mortgage Describe the property that secures the claim: \$80,430.00 \$0.00 Creditor's Name Single Family Home Po Box 10335 18134 West Sharon Road Oakley, MI 48649 Number Street Des Moines, IA 50306 State ZIP Code Who owes the debt? Check one. **✓** Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another ☐ Check if this claim relates to a community debt Date debt was incurred 4/22/2005 As of the date you file, the claim is: Check all that apply. □ Contigent Unlquidated ☐ Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number 8 5 9 9

\$80,430.00

Add the dollar value of your entries in Column A on this page. Write that number here:

Debtor 1 Steven Goward Case number (if known) First Name Middle Name Last Name Column A Column C Column B Additional Page Amount of claim Value of collateral Unsecured Part 1: After listing any entries on this page, number them beginning Do not deduct the that supports portion this claim with 2.3, followed by 2.4, and so forth. value of collateral. If any 2.2 Describe the property that secures the claim: Creditor's Name Number Street City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another ☐ Check if this claim relates to a community debt Date debt was incurred As of the date you file, the claim is: Check all that apply. □ Contigent Unlquidated ☐ Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number ___ __ __ Add the dollar value of your entries in Column A on this page. Write that number here: \$0.00 If this is the last page of your form, add the dollar value totals from all pages. Write that number \$80,430.00

here:

Debtor 1	Steven	L	Goward	Case number (if known)
	First Name	Middle Name	Last Name	
Part 2: List	Others to Be N	lotified for a Debt T	hat You Already Lis	ted
to collect from y	ou for a debt you	owe to someone else, lis	t the creditor in Part 1, an	of that you already listed in Part 1. For example, if a collection agency is trying ad then list the collection agency here. Similarly, if you have more than one are. If you do not have additional persons to be notified for any debts in Part 1,
1 Trott Law,	PC			On which line in Part 1 did you enter the creditor?
Name	. •			
31440 No	thwestern Hwdy Set	t 145		Last 4 digits of account number
Number	Street			_
				<u>_</u>
	on Hills, MI 48334		toto ZID Codo	_
City		S	tate ZIP Code	

Fill in this information t	o identify your case:						
Debtor 1	Steven	L	Goward				
	First Name	Middle Name	Last Name	_			
Debtor 2				_			
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankru	ptcy Court for the:	Ea	stern District of Michigan	_			
Case number						Check if t	
(if known)						amended	illing
Official Form	106F/F						
		\ \		Olaina a			
scheaule E	L/F: Credit	ors wno	Have Unsecured	Claims			12/15
any executory contract Schedule G: Executory D: Creditors Who Hold	s or unexpired lease / Contracts and Une. / Claims Secured by to this page. On the	s that could result in expired Leases (Office Property. If more so top of any addition	ors with PRIORITY claims and Part in a claim. Also list executory contractial Form 106G). Do not include any pace is needed, copy the Part your hall pages, write your name and case ims	cts on <i>Schedule A/B:</i> creditors with partially need, fill it out, numbe	Property (Of y secured cla	fficial Form 1 aims that are	106A/B) and on elisted in Schedule
Do any creditors	have priority unsecu	red claims against	vou?				
No. Go to Par		rea ciamic agamer	you.				
Yes.				P of P			
identify what type possible, list the cl Part 1. If more tha	of claim it is. If a claim aims in alphabetical c in one creditor holds a	has both priority and order according to the a particular claim, lis	more than one priority unsecured claid nonpriority amounts, list that claim he ecreditor's name. If you have more that the other creditors in Part 3. In sort his form in the instruction bookless.	ere and show both prio an two priority unsecur	rity and nonp	riority amount	ts. As much as
					Total claim	Priority amount	Nonpriority amount
2.1 Internal Reve	Comico		Last 4 dimits of account number (2042	\$705.14		
2.1 Internal Reversity Creditor's			Last 4 digits of account number (0 When was the debt incurred?) <u>243</u> 2/31/2008			
Special Proce	dures Branch		As of the date you file, the claim is				
PO Box 7346	Street		apply. Contingent				
Number S Philadelphia, I			☐ Unliquidated				
City	State	ZIP Code	☐ Disputed				
Who incurred ✓ Debtor 1 or	the debt? Check one		Type of PRIORITY unsecured clair	n:			
Debtor 2 or			Domestic support obligationsTaxes and certain other debts you	ou owe the			
_	nd Debtor 2 only		government				
	of the debtors and ar is claim is for a com		Claims for death or personal injuintoxicated	ury while you were			
	bject to offset?	mainty debt	Other. Specify				
☑ No	.,						
☐ Yes							
2.2 Internal Rever			Last 4 digits of account number _	0243	\$343.07	7 unkno	wn \$343.07
Special Proce			-	2009			
PO Box 7346	aaroo Branon		As of the date you file, the claim is apply.	: Cneck all that			
Number S	Street		Contingent				
Philadelphia, I	PA 19101 State	ZIP Code	☐ Unliquidated☐ Disputed				
•	the debt? Check one		Type of PRIORITY unsecured clair	n:			
Debtor 1 or	nly		Domestic support obligations				
Debtor 2 or			Taxes and certain other debts you	ou owe the			
	nd Debtor 2 only of the debtors and ar	nother	government Claims for death or personal inju	ury while you were			
	is claim is for a com		intoxicated	, , , , , , , , , , , , , , , , , , , ,			
	bject to offset?		☐ Other. Specify				
⊻ Í No □ Yes							

Steven Goward Case number (if known).

First Name Middle Name Last Name Part 1: Your PRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. Total Priority Nonpriority claim \$7,234.56 \$0.00 \$7,234.56 2.3 Internal Revenue Service Last 4 digits of account number 0243 Priority Creditor's Name When was the debt incurred? 2014 **Special Procedures Branch** As of the date you file, the claim is: Check all that PO Box 7346 apply. Number Street ☐ Contingent Philadelphia, PA 19101 Unliquidated State ZIP Code Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: **☑** Debtor 1 only Domestic support obligations Debtor 2 only Taxes and certain other debts you owe the Debtor 1 and Debtor 2 only government At least one of the debtors and another Claims for death or personal injury while you were ☐ Check if this claim is for a community debt intoxicated Other. Specify Is the claim subject to offset? M No ☐ Yes \$7,148.20 \$7,148.20 \$0.00 2.4 **Internal Revenue Service** Last 4 digits of account number 0243 Priority Creditor's Name When was the debt incurred? 2015 Special Procedures Branch As of the date you file, the claim is: Check all that PO Box 7346 apply. Number Street Contingent Philadelphia, PA 19101 Unliquidated State ZIP Code Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: ☑ Debtor 1 only Domestic support obligations Debtor 2 only Taxes and certain other debts you owe the Debtor 1 and Debtor 2 only government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated Other. Specify Is the claim subject to offset? **☑** No ☐ Yes \$0.00 \$4,358.18 \$4,358.18 2.5 Internal Revenue Service Last 4 digits of account number 0243 Priority Creditor's Name When was the debt incurred? 2016 **Special Procedures Branch** As of the date you file, the claim is: Check all that PO Box 7346 apply.

Number Street Philadelphia, PA 19101 State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? **☑** No

Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government

Claims for death or personal injury while you were intoxicated

☐ Yes

☐ Yes

 Steven
 L
 Goward
 Case number (if known)

 First Name
 Middle Name
 Last Name

listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.			Priority amount	Nonpriority amount
Internal Revenue Service Priority Creditor's Name Special Procedures Branch PO Box 7346 Number Street Philadelphia, PA 19101 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	Last 4 digits of account number 0243 When was the debt incurred? 2017 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated	<u>\$9,280.</u>	<u>\$9,280.</u>	86 \$0
	Claims for death or personal injury while you were			

Debtor 1 Steven Goward Case number (if known) First Name Middle Name Last Name List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ✓ Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Total claim \$647.00 4.1 **Capital One** Last 4 digits of account number 9349 Nonpriority Creditor's Name When was the debt incurred? 07/01/2018 Po Box 30281 As of the date you file, the claim is: Check all that apply. Number Street Contingent Salt Lake City, UT 84130 Unliquidated ZIP Code State Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other Check if this claim is for a community debt similar debts ✓ Other. Specify Is the claim subject to offset? CreditCard **☑** No ☐ Yes \$100.00 Cr Srvs Of Michigan Last 4 digits of account number 3078 Nonpriority Creditor's Name When was the debt incurred? 06/01/2018 1982 Hemmeter St As of the date you file, the claim is: Check all that apply. Number Street Contingent Saginaw, MI 48603 Unliquidated State ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ■ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims ☐ At least one of the debtors and another Debts to pension or profit-sharing plans, and other ☐ Check if this claim is for a community debt similar debts ✓ Other. Specify Is the claim subject to offset? CollectionAttorney **☑** No ☐ Yes \$232.00 4.3 **ERC/Enhanced Recovery Corp** Last 4 digits of account number 9420 Nonpriority Creditor's Name When was the debt incurred? 06/01/2015 8014 Bayberry Rd As of the date you file, the claim is: Check all that apply. Number Street Contingent

Unliquidated

☐ Student loans

similar debts Other. Specify

CollectionAttorney

Type of NONPRIORITY unsecured claim:

Obligations arising out of a separation agreement or

Debts to pension or profit-sharing plans, and other

divorce that you did not report as priority claims

Disputed

ZIP Code

Jacksonville, FL 32256

☑ Debtor 1 only

Debtor 2 only

✓ No ☐ Yes

Who incurred the debt? Check one.

At least one of the debtors and another

Check if this claim is for a community debt

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

Steven Goward Case number (if known) First Name Middle Name Last Name

Part 3: List Others to Be Notified About a Debt That You Already Listed

US Attorn	I for any debts in			On which entry in Part 1 or Part 2 did you list the original creditor?
Name	еу			
Attn: Civi	l Division			Line of (Check one): 2 Part 1: Creditors with Priority Unsecured Claims
600 Churc				Part 2: Creditors with Nonpriority Unsecured Claims
Number	Street			,
Flint, MI 4	8502			Last 4 digits of account number
City		State	ZIP Code	
				One which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
ramboi	Olicci			Tare 2. Ordanois war Horipholity of occourse dialine
				Last 4 digits of account number
City		State	ZIP Code	
Oity		State	ZIF COUE	
				One which entry in Part 1 or Part 2 did you list the original creditor?
Name			_	Port 1: Craditors with Drievit: Unaccured Claims
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
City		State	ZIP Code	
				One which entry in Part 1 or Part 2 did you list the original creditor?
Name				
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 divite of account number
				Last 4 digits of account number
City		State	ZIP Code	
NI				One which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
	0001			— Fart 2. Ordanolo Will Horipholity Orlocodiod Oldino
				Last 4 digits of account number
City		State	ZIP Code	
			5545	
				One which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
				· · · · · · · · · · · · · · · · · · ·
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
City		State	ZIP Code	
				One which entry in Part 1 or Part 2 did you list the original creditor?
Name				
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				·
				Last 4 digits of account number
City		State	ZIP Code	

Steven Goward Case number (if known) First Name Middle Name Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a. Domestic support obligations	6a.	\$0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$29,070.01
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. +	\$0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$29,070.01
			Total claim
Total claims	6f. Student loans	6f.	\$0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
		6i. +	\$979.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.		

to identify your case:				
Steven	L	Goward		
First Name	Middle Name	Last Name		
First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		astern District of Michigan		
				☐ Check if th
				amended
	Steven First Name	Steven L First Name Middle Name First Name Middle Name	Steven L Goward First Name Middle Name Last Name First Name Middle Name Last Name	Steven L Goward First Name Middle Name Last Name First Name Middle Name Last Name

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☑No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or o	company with v	vhom you hav	e the contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	

Fill	in this information	to identify your case:			
De	ebtor 1	Steven	L	Goward	
		First Name	Middle Name	Last Name	
	ebtor 2	- El AN	Add I III Al	To a N	
	pouse, if filing)	First Name	Middle Name	Last Name	
Ur	nited States Bankri	uptcy Court for the:	Ea	stern District of Michigan	
	ase number known)				☐ Check if this is an amended filing
Of	ficial Form	า 106H			
Sc	hedule	——— H: Your Co	ndehtors		42/45
					12/15
both	are equally response	onsible for supplying	g correct information	n. If more space is needed,	omplete and accurate as possible. If two married people are filing together, copy the Additional Page, fill it out, and number the entries in the boxes or e your name and case number (if known). Answer every question.
1.		codebtors? (If you a	are filing a joint case, o	do not list either spouse as a	a codebtor.)
	√No				
	Yes				
				pperty state or territory? (Cington, and Wisconsin.)	Community property states and territories include Arizona, California, Idaho,
	☑No. Go to line	3.			
	•	spouse, former spous	e, or legal equivalent l	live with you at the time?	
	□No				-
	Yes. In which	ch community state oi	r territory did you live?		Fill in the name and current address of that person.
	Name				
	Number	Street			
	City		State ZIP Code		
	codebtor only if	that person is a guar	rantor or cosigner. N	lake sure you have listed th	your spouse is filing with you. List the person shown in line 2 again as a he creditor on Schedule D (Official Form 106D), Schedule E/F (Official r Schedule G to fill out Column 2.
	Column 1: Your c	odebtor			Column 2: The creditor to whom you owe the debt

Official Form 106H Schedule H: Your Codebtors page 1 of 1

Name

Number

City

Street

State

ZIP Code

Check all schedules that apply:

Schedule D, line _

☐ Schedule E/F, line ____ ☐ Schedule G, line ____

Fill	in this information to	identify your case	2:				
D	ebtor 1	Steven		oward			
_		First Name	Middle Name La	st Name			
	ebtor 2 Spouse, if filing)	First Name	Middle Name La	st Name			Check if this is:
U	nited States Bankrup	tcy Court for the:	Eastern	District of Michigan			☐ An amended filing
С	ase number known)			J			A supplement showing postpetition chapter 13 income as of the following date:
							MM / DD / YYYY
Of	ficial Form	106I					
Sc	chedule I:	Your Inc	come				12/15
po dd	use is not filing with	you, do not incl our name and ca		spouse. If more space			ur spouse. If you are separated and your ate sheet to this form. On the top of any
1.	Fill in your employr information.	ment		Debtor 1			Debtor 2 or non-filing spouse
	If you have more tha attach a separate pa information about ac	age with	Employment status	☑ Employed ☐ No	it Employed		☐ Employed ☐ Not Employed
	employers.		Occupation	General Motors			
	Include part time, se self-employed work.		Employer's name				
	Occupation may inclor homemaker, if it a		Employer's address	3100 Van Slyke Roa Number Street	<u>.d</u>		Number Street
			How long employed there	Flint, MI 48507 City 41 years 6 months	State Zi	ip Code	City State Zip Code
Pa	art 2: Give Deta	ils About Mor	thly Income				
	Estimate monthly i are separated.	ncome as of the	date you file this form. If yo	u have nothing to repo	t for any line, wr	ite \$0 in the s _l	pace. Include your non-filing spouse unless you
	•	• .	nore than one employer, com	bine the information for	all employers fo	or that person	on the lines below. If you need more space,
					For De		For Debtor 2 or non-filing spouse
2.			d commissions (before all particular) ate what the monthly wage w		\$4,9	907.76	\$0.00
3.	Estimate and list m	onthly overtime	рау.	3.	+\$4,7	741.66 +	\$0.00

\$9,649.42

\$0.00

4. Calculate gross income. Add line 2 + line 3.

 Steven
 L
 Goward

 First Name
 Middle Name
 Last Name

Case number (if known)

			For	Debtor 1		For Debtor 2 or non-filing spouse	
	Copy line 4 here→	4.		\$9,649.42		\$0.00	
5.	List all payroll deductions:						
	5a. Tax, Medicare, and Social Security deductions	5a.	;	\$2,300.22		\$0.00	
	5b. Mandatory contributions for retirement plans			\$0.00		\$0.00	
	5c. Voluntary contributions for retirement plans	5b.		\$222.21		\$0.00	
	5d. Required repayments of retirement fund loans	5c.		\$173.51		\$0.00	
	5e. Insurance	5d.		\$40.04		\$0.00	
		5e.		\$0.00		\$0.00	
	5f. Domestic support obligations	5f.	-	\$99.23		\$0.00	
	5g. Union dues	5g.		\$0.00	_	\$0.00	
;	5h. Other deductions. Specify:	5h.	'	φυ.υυ	•	φυ.υυ_	
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	;	\$2,835.21		\$0.00	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	;	\$6,814.21		\$0.00	
8.	List all other income regularly received:						
;	Ba. Net income from rental property and from operating a business, profession, or farm						
	Attach a statement for each property and business showing gross receipts,						
	ordinary and necessary business expenses, and the total monthly net income.	8a.		\$0.00		\$0.00	
	Bb. Interest and dividends	8b.		\$0.00		\$0.00	
	Bc. Family support payments that you, a non-filing spouse, or a dependent regularly receive			<u> </u>			
	Include alimony, spousal support, child support, maintenance, divorce	_		\$0.00		\$0.00	
	settlement, and property settlement.	8c.		\$0.00		\$0.00	
	8d. Unemployment compensation	8d.		\$0.00		\$0.00	
	Be. Social Security	8e.		ψ0.00		Ψ0.00	
•	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental						
	Nutrition Assistance Program) or housing subsidies.	8f.		\$0.00		\$0.00	
	Specify:			\$0.00		\$0.00	
	8g. Pension or retirement income	8g. 8h.	+	\$0.00	+		
	Bh. Other monthly income. Specify:	oΠ.	•	ψυ.υυ		ψυ.υυ	
). <i>i</i>	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.		\$0.00		\$0.00	
	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.		\$6,814.21	+	\$0.00] =
11.	State all other regular contributions to the expenses that you list in Schedule	J.			_		_
	include contributions from an unmarried partner, members of your household, your criends or relatives.		nts, your roo	mmates, ar	nd oth	er	
	Do not include any amounts already included in lines 2-10 or amounts that are not a	vailable	to pay expe	nses listed i	n <i>Sch</i>	nedule J.	
	Specify:				_	11.	+
12.	Add the amount in the last column of line 10 to the amount in line 11. The resultance of Your Assets and Liabilities and Certain Statistical Information			onthly incor	me. W		
13.	Do you expect an increase or decrease within the year after you file this form?						
	√ No.						
	Yes. Explain:						

Fil	ll in this information to i	dentify your case:						
	Debtor 1	Steven	L	Goward				
		First Name	Middle Name	Last Name	_	Check if t		
	Debtor 2 Spouse, if filing)	First Name	Middle Name	Last Name		_	nended filing	
	Jnited States Bankrupto			Eastern District of	f Michigan		plement showing per 13 income as o	postpetition f the following date:
	•	by Court for the.		Eastern District of	i wichigan			
_	Case number f known)					MM /	DD / YYYY	
0	fficial Form	106J						
	chedule J:		oenses					12/15
Ве	as complete and accu	ırate as possible. I	f two married ped					information. If more space is
nee	eded, attach another s	heet to this form.	On the top of any	additional pages,	write your name and case	number (if I	known). Answer	every question.
Pa	art 1: Describe Y	our Household						
1.	Is this a joint case?							
	☑ No. Go to line 2.							
	Yes. Does Debto	r 2 live in a separa	te household?					
	□ No □ Yes De	ahtor 2 must fila Off	icial Form 106 l-2	Evnenses for Ser	parate Household of Debtor	2		
2.	Do you have depen		✓ No	, Expended for eq.	drate Floaderiola of Bostor			
	Do not list Debtor 1 a			nis information for	Dependent's relationshi	p to	Dependent's	Does dependent live
	Debtor 2.		each depende		Debtor 1 or Debtor 2		age	with you? ☐ No. ☐ Yes.
	Do not state the depe	endents' names.						·
								No. Yes.
							-	□No. □Yes.
								No. ☐Yes.
								No. ☐Yes.
3.	Do your expenses in of people other that your dependents?		√ No □Yes					
Pa	art 2: Estimate	our Ongoing M	lonthly Expen	ses				
					ng this form as a supplement the top of the form and fil			port expenses as of a date after
In	clude expenses paid	for with non-cash	government assi	stance if you knov	v the value of		You	ır expenses
	ich assistance and ha			-	-			и охреново
4.	The rental or home ground or lot.	ownership expens	es for your reside	ence. Include first n	nortgage payments and any	rent for the	4.	
	If not included in the	no 4:						
	If not included in lin						4a.	\$0.00
	4a. Real estate taxes						4b.	\$0.00
	4b. Property, homeo						4c.	\$100.00

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

\$100.00

\$0.00

4d.

 Steven
 L
 Goward

 First Name
 Middle Name
 Last Name

Case number (if known)

			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$250.00
	6b. Water, sewer, garbage collection	6b.	\$0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$83.00
	6d. Other. Specify:	6d.	\$0.00
7.	Food and housekeeping supplies	7.	\$400.00
8.	Childcare and children's education costs	8.	\$0.00
9.	Clothing, laundry, and dry cleaning	9.	\$80.00
10.	Personal care products and services	10.	\$30.00
11.	Medical and dental expenses	11.	\$20.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$650.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$100.00
14.	Charitable contributions and religious donations	14.	\$0.00
15.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$0.00
	15b. Health insurance	15b.	\$0.00
	15c. Vehicle insurance	15c.	\$220.00
	15d. Other insurance. Specify:	15d.	\$0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$0.00
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	
	17b. Car payments for Vehicle 2	17b.	
	17c. Other. Specify:	17c.	
	17d. Other. Specify:	17d.	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$0.00
19.	Other payments you make to support others who do not live with you. Specify:	19.	\$0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
	20a. Mortgages on other property	20a.	\$0.00
	20b. Real estate taxes	20b.	\$0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
	20e. Homeowner's association or condominium dues	20e.	\$0.00
			-

Debtor 1	Steven	L	Goward	Case number (if kno	Case number (if known)				
	First Name	Middle Name	Last Name						
21. Other. Spe	ecify:	Pet Care		21. +	\$40.00				
22. Calculate	our monthly expen	ises.							
22a. Add li	nes 4 through 21.			22a	\$1,973.00				
22b. Copy	line 22 (monthly expe	enses for Debtor 2), if any	, from Official Form 106J-2	22b	\$0.00				
22c. Add lii	ne 22a and 22b. The	result is your monthly exp	penses.	22c	\$1,973.00				
23. Calculate	your monthly net in	come.							
23а. Сору	line 12 (your combine	ed monthly income) from	Schedule I.	23a. <u> </u>	\$6,814.21				
23b. Copy	your monthly expense	es from line 22c above.		23b	\$1,973.00				
23c. Subtra	act your monthly expe	enses from your monthly in	ncome.		C4 044 04				
The	esult is your <i>monthly</i>	net income.		23c	\$4,841.21				
24. Do you ex	pect an increase or	decrease in vour expens	ses within the year after you file this	form?					
For examp	le, do you expect to f	inish paying for your car k	oan within the year or do you expect you a modification to the terms of your mo	our					
☑No. ☐Yes.	None								

Fill in this information to identify your case:								
Debtor 1	Steven	L	Goward					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States Bankru	uptcy Court for the:	Ea	stern District of Michigan					
Case number (if known)						Ch an		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

and check the box at the top of this page.	
Part 1: Summarize Your Assets	
1. Schedule A/B: Property (Official Form 106A/B)	Your assets Value of what you own
1a. Copy line 55, Total real estate, from <i>Schedule A/B</i>	\$104,200.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$6,056.00 \$110,256.00
10. Copy line 63, Total of all property of 1 Schedule A/B	
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$80,430.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$29,070.01
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$979.00
Your total liabilities	\$110,479.01
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$6,814.21
5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$1,973.00

Debtor 1	Steven	L	Goward	Case number (if kno	wn)
	First Name	Middle Name	Last Name		
Part 4: An	swer These Ques	tions for Administr	rative and Statistical Records		
_		er Chapters 7, 11, or 13' on this part of the form. (? Check this box and submit this form to the	court with your other schedules.	
7. What kind o	of debt do you have?				
☑ Your de	ebts are primarily cons	sumer debts. Consumer	debts are those "incurred by an individual ut lines 8-9g for statistical purposes. 28 L	primarily for a personal, J.S.C. § 159.	
☐ Your de		consumer debts. You ha	eve nothing to report on this part of the form		
		rent Monthly Income: C 22B Line 11; OR , Form 12	opy your total current monthly income fror 22C-1 Line 14.	m Official	\$9,649.42
					L
9. Copy the fo	llowing special catego	ories of claims from Par	t 4, line 6 of Schedule E/F:		
				Total claim	
From Pa	rt 4 on Schedule E/F,	copy the following:			
9a. Dome	stic support obligations	s (Copy line 6a.)		\$0.0	0_
9b. Taxes	and certain other debts	you owe the governmen	t. (Copy line 6b.)	\$29,070.0	<u>1</u>
9c. Claims	s for death or personal	injury while you were into	xicated. (Copy line 6c.)	\$0.0	<u>0</u>
9d. Studer	nt loans. (Copy line 6f.)			\$0.0	0
	tions arising out of a se (Copy line 6g.)	paration agreement or d	ivorce that you did not report as priority	\$0.0	0_
9f. Debts t	to pension or profit-sha	ring plans, and other sim	nilar debts. (Copy line 6h.)	+\$0.00	- ¬
9g. Total .	Add lines 9a through 9	of.		\$29,070.01	

Fill in this information t	to identify your case:			
Debtor 1	Steven	L	Goward	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankru	ptcy Court for the:	Ea	stern District of Michigan	
Case number				
(if known)				

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
d you pay or agree to pay someone who is NOT an	attorney to help you fill out bankruptcy forms?
Í No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
nder penalty of periury I declare that I have read the	summary and schedules filed with this declaraion and that they are true and correct.
periming of periming, adolate and interested and	
X /s/ Steven L Goward	.,
/s/ Steven L Goward Steven L Goward, Debtor 1, Debtor 1	— x
	Date

Fill in this information	to identify your case:			
Debtor 1	Steven	L	Goward	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankru	uptcy Court for the:	Ea	stern District of Michigan	
Case number (if known)				

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

☐ Married ☑ Not married					
During the last 3 years, √1 No		other than where you live n ears. Do not include where y			
Debtor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
Number Street		From To	Number Street		Same as Debtor 1 From To
City	State ZIP Code	From	City Same as Debtor 1	State ZIP Code	☐ Same as Debtor 1
Number Street		To	Number Street		To
City	State ZIP Code	<u> </u>	City	State ZIP Code	_

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1		L Goward Middle Name Last Nam	ne	Case number (if kno	wn)
			ivalent in a community property of the Rico, Texas, Washington, and N		nity property states and territories
√ No	.,	,	g	,	
	ke sure vou fill out <i>Sch</i> ed	lule H: Your Codebtors (Official F	orm 106H).		
Dart 2: Evn	lain the Sources of	S Vour Incomo			
Part 2: Exp	Iam the Sources of	Tour meome			
Fill in the total	amount of income you re		isiness during this year or the two esses, including part-time activities er, list it only once under Debtor 1.		•
☐ No					
✓ Yes. Fill	in the details.				
		Debtor 1		Debtor 2	
		Sources of income	Gross Income	Sources of income	Gross Income
		Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
	ary 1 of current year unted for bankruptcy:	il the Wages, commission bonuses, tips	ns, \$1,258.40	☐ Wages, commissions, bonuses, tips	
		Operating a busines	S	Operating a business	
For last cale	endar year: December 31, 2018	Wages, commission bonuses, tips	ns, \$115,793.22	☐ Wages, commissions, bonuses, tips	
(odridary i to	YYY	Operating a busines	SS	Operating a business	
	ndar year before that: December 31, 2017	Wages, commission bonuses, tips	ns, \$116,411.00	☐ Wages, commissions, bonuses, tips	
(January 1 to	YYY	Operating a busines	ss	Operating a business	
Include income payments; pen have income the	e regardless of whether the sions; rental income; into		ous calendar years? of other income are alimony; child source from lawsuits; royalties; and gamble		
ies. Fili	iii tile details.	Debtor 1		Debtor 2	
		Sources of income	Gross income from each	Sources of income	Gross Income from each
		Describe below.	source (before deductions and exclusions)	Describe below.	source (before deductions and exclusions)
	ry 1 of current year unted for bankruptcy:	il the			
•	. ,				

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	Steven	<u> </u>	Goward		Case number (i	f known)
	First Name	Middle Name	Last Name			
For last ca	lendar year:					
	to December 31,	2018)				
		YYYY				<u> </u>
For the cal	lendar year befo	re that:			_	
(January 1	to December 31,	<u>2017</u>)			_	
					_	
Part 3: Lis	st Certain Pay	yments You Made E	Before You Filed	l for Bankruptcy		
6 Aro oithar	Dobtor 1'o or Dob	otor 2'a dobto primarily	aanaumar dahta?			
o. Are either	Debtor 1 S or Det	otor 2's debts primarily	consumer debts?			
				ots. Consumer debts are defi	ned in 11 U.S.C. § 101(8) as	s "incurred by an
		ly for a personal, family, or before you filed for bar		e." any creditor a total of \$6,425	5* or more?	
		•	inapicy, dia you pay	arry creditor a total of \$0,420	o di more:	
	☐ No. Go to line					
	credito		nts for domestic sup	\$6,425* or more in one or moport obligations, such as chi		
,		•		for cases filed on or after the	e date of adjustment.	
√ Yes.	Debtor 1 or Debt	tor 2 or both have prim	arily consumer del	ots.		
	During the 90 day	s before you filed for bar	nkruptcy, did you pay	any creditor a total of \$600 c	or more?	
	☑No. Go to line	7.				
	payme			\$600 or more and the total as child support and alimony.		
			Dates of	Total amount paid	Amount you still owe	Was this payment for
			payment			
_			payment			☐ Mortgage
	reditor's Name		payment			☐ Mortgage
Cr	reditor's Name		payment			
_	reditor's Name		payment			☐ Car ☐ Credit card ☐ Loan repayment
_			payment	-		☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors
_			payment	- -		☐ Car ☐ Credit card ☐ Loan repayment
_	umber Street	State ZIP Code	payment	-		☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors

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	Steven	L	Goward		Case r	iumber (if knowi	1)
	First Name	Middle Name	Last Nam	e			
			Dates of	Total amount paid	Amount you still owe	Reason for th	is payment
			payment				
nsider's Na	ame						
Number	Street						
City	State	ZIP Code					
clude paym √ No	nents on debts guarai	nteed or cosigned b	oy an insider.	ments or transfer any	property on account of	a debt that ber	efited an insider?
Yes. Lis	st all payments that be	enerited an Insider.					
			Dates of payment	Total amount paid	Amount you still owe	Reason for th	
			paymon			Include credito	r's name
Insider's Na	ame						
Number	Street						
		ZIP Code					
City	State	Zii Gode					
rt 4: Ide Within 1 ye st all such r sputes.	entify Legal Acti	ions, Reposses		y lawsuit, court action	, or administrative proce uits, paternity actions, su		v modifications, and contra
rt 4: Ide Within 1 yest all such reputes. No	entify Legal Acti ear before you filed matters, including pe	ions, Reposses	ere you a party in an	y lawsuit, court action			/ modifications, and contra
within 1 you stall such reputes.	entify Legal Acti	ions, Reposses for bankruptcy, w rsonal injury cases	ere you a party in an , small claims actions	y lawsuit, court action s, divorces, collection s	uits, paternity actions, su		
within 1 yest all such resputes.	entify Legal Acti ear before you filed matters, including pe	ions, Reposses for bankruptcy, w rsonal injury cases	ere you a party in an	y lawsuit, court action s, divorces, collection s			r modifications, and contra
within 1 yest all such reputes. No Yes. Fill	entify Legal Acti ear before you filed matters, including pe	for bankruptcy, w rsonal injury cases	ere you a party in an , small claims actions	y lawsuit, court action s, divorces, collection s	uits, paternity actions, su		
within 1 yest all such reputes. No Yes. Fill	entify Legal Actinear before you filed matters, including pe	for bankruptcy, w rsonal injury cases	ere you a party in an , small claims actions	y lawsuit, court action s, divorces, collection s	uits, paternity actions, su		Status of the case
within 1 yest all such reputes. No Yes. Fill	entify Legal Actinear before you filed matters, including pe	for bankruptcy, w rsonal injury cases	ere you a party in an , small claims actions	y lawsuit, court action s, divorces, collection s	uits, paternity actions, su		Status of the case
within 1 yest all such resputes. ✓ No ☐ Yes. Fill Case title	entify Legal Actinear before you filed matters, including pe	for bankruptcy, w rsonal injury cases	ere you a party in an , small claims actions	y lawsuit, court action s, divorces, collection s	uits, paternity actions, su Irt or agency Name		Status of the case Pending On appeal
Within 1 yest all such resputes. Mo Yes. Fill Case title	entify Legal Actinear before you filed matters, including pe	for bankruptcy, w rsonal injury cases	ere you a party in an , small claims actions	y lawsuit, court action so divorces, collection so Court	uits, paternity actions, su urt or agency Name	pport or custody	☐ Pending ☐ On appeal

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

Official Form 107

		L	Goward	Case number (if known)	
	First Name	Middle Name	Last Name		
10 Within 1	waar bafara way fila	d for hankruntov w	as any of your property repossessed force	closed garnished attached spizad or leviad?	
	at apply and fill in the		as any or your property repossessed, fore	closed, garnished, attached, seized, or levied?	
√ No. Go	to line 11.				
Yes. Fi	ll in the information b	elow.			
			Describe the property	Date Value of the	property
Creditor's N	Name				
Number	Street		Explain what happened		
			Property was repossessed.		
			☐ Property was foreclosed.☐ Property was garnished.		
City	Sta	ate ZIP Code	Property was attached, seized,	or levied.	
			· ·		
☑ No ☐ Yes. Fi	II in the details.				
			Describe the action the creditor took	Date action was Amount	
Creditor's N	Name			taken	
Creditor S i					
Number	Street				
	Street	e ZIP Code			
Number		e ZIP Code	Last 4 digits of account number: XXXX		
Number City 12. Within 1 receiver, a compared to the second of the sec	Stat	d for bankruptcy, wa er official?	as any of your property in the possession	——— of an assignee for the benefit of creditors, a court-app	ointed
Number City 12. Within 1 receiver, a company of the property	Stat year before you file ustodian, or anothe st Certain Gifts	d for bankruptcy, wa er official? and Contributio	as any of your property in the possession	of an assignee for the benefit of creditors, a court-app	ointed
Number City 12. Within 1 receiver, a co Yes Part 5: List	Stat year before you file ustodian, or anothe st Certain Gifts	d for bankruptcy, wa er official? and Contributio	as any of your property in the possession	of an assignee for the benefit of creditors, a court-app	ointed
Number City 12. Within 1 receiver, a compared by Yes Part 5: List 13. Within 2	year before you file ustodian, or anotherst Certain Gifts	d for bankruptcy, wa er official? and Contribution	as any of your property in the possession	of an assignee for the benefit of creditors, a court-app	ointed
Number City 12. Within 1 receiver, a compared by Yes Part 5: List 13. Within 2	Stat year before you file ustodian, or anothe st Certain Gifts	d for bankruptcy, wa er official? and Contribution	as any of your property in the possession	of an assignee for the benefit of creditors, a court-app	ointed
Number City 12. Within 1 receiver, a compared by Yes Part 5: List 13. Within 2	year before you file ustodian, or anotherst Certain Gifts	d for bankruptcy, wa er official? and Contribution	as any of your property in the possession	of an assignee for the benefit of creditors, a court-app	ointed
Number City 12. Within 1 receiver, a condition 1 Yes Part 5: List	year before you file ustodian, or anotherst Certain Gifts	d for bankruptcy, wa er official? and Contribution	as any of your property in the possession	of an assignee for the benefit of creditors, a court-app	ointed
Number City 12. Within 1 receiver, a compared by Yes Part 5: List 13. Within 2	year before you file ustodian, or anotherst Certain Gifts	d for bankruptcy, wa er official? and Contribution	as any of your property in the possession	of an assignee for the benefit of creditors, a court-app	ointed
Number City 12. Within 1 receiver, a compared by Yes Part 5: List 13. Within 2	year before you file ustodian, or another st Certain Gifts years before you file.	d for bankruptcy, wa er official? and Contribution ed for bankruptcy, d	as any of your property in the possession	of an assignee for the benefit of creditors, a court-app	ointed

tor 1	Steven	L	Goward	Case number (if know	wn)
	First Name	Middle Name	Last Name		
Gifts with person	n a total value of mo	ore than \$600 per	Describe the gifts	Dates you gave the gifts	Value
Person to	Whom You Gave the 0	Gift			
Number	Street		-		
City	St	tate ZIP Code	-		
^o erson's re	elationship to you				
	years before you file	ed for bankruptcy,	did you give any gifts or contributions with a	total value of more than \$600 to a	iny charity?
√No					
	Il in the details for ea				
	contributions to cha re than \$600	arities that Descr	ibe what you contributed	Date you contributed	Value
Charity's Na	ame				
Number	Street				
City	State	ZIP Code			
City	State	ZIP Code			
rt 6: Lis	st Certain Losse	es			
	year before you file	d for bankruptcy o	r since you filed for bankruptcy, did you lose a	anything because of theft, fire, oth	ner disaster, or gambling?
√No					
_	II in the details.				
☐ Yes. Fi			any insurance coverage for the loss	Date of your loss	Value of property lost
Describe	the property you lo				
Describe		Include t	he amount that insurance has paid. List pending e claims on line 33 of Schedule A/B: Property.		
Describe		Include t	he amount that insurance has paid. List pending		
Describe		Include t	he amount that insurance has paid. List pending		
Describe		Include t	he amount that insurance has paid. List pending		
Describe		Include t	he amount that insurance has paid. List pending		
Describe		Include t	he amount that insurance has paid. List pending		
Describe		Include t	he amount that insurance has paid. List pending		

Debtor 1	Steven	L	Goward	Case number (if know	wn)
	First Name	Middle Name	Last Name		
Part 7:	List Certain Paymer	nts or Transfe	'S		
	n 1 year before you filed f eankruptcy or preparing a		l you or anyone else acting on your behalf p	pay or transfer any property to any	one you consulted about
Include an	ny attorneys, bankruptcy p	etition preparers, o	r credit counseling agencies for services requ	iired in your bankruptcy.	
□No					
	Fill in the details.				
Yes.	Fill in the details.				
1 . 01		Descrip	otion and value of any property transferred	Date payment or transfer was made	Amount of payment
	fices of James L Gutting Who Was Paid	Attorney's	s Fee	u ansier was made	
601 We	est Corunna Ave. A		,, 66	1/7/2019	\$400.00
Number					
	MI 40047 4070				
City	na, MI 48817-1378 State ZIF	² Code			
Email or	website address				
		N V			
Person V	Who Made the Payment, if	Not You			
17 Within	1 vear before you filed f	or bankruptcy die	l you or anyone else acting on your behalf p	nay or transfer any property to any	one who promised to help you
deal with	your creditors or to make	e payments to you	r creditors?	bay or transfer any property to any	one who promised to help you
Do not inc	lude any payment or trans	fer that you listed o	n line 16.		
✓No					
☐ Yes.	Fill in the details.				
		Descri	otion and value of any property transferred	Date payment or	Amount of payment
			,, ,	transfer was made	, ,
Person '	Who Was Paid				
Number	Street				
-					
City	State ZIF	Code			
18. Within	2 vears before you filed	for bankruptcy, d	id you sell, trade, or otherwise transfer any	property to anyone, other than pro	operty transferred in the
ordinary o	course of your business	or financial affairs	?		
	oth outright transfers and t Hude gifts and transfers tha		security (such as the granting of a security int listed on this statement.	erest or mortgage on your property).
✓No	3	,			
_					
☐Yes.	Fill in the details.				
Official Form	n 107	State	ement of Financial Affairs for Individuals F	iling for Bankruptey	page 7
		J.u.		J	page i

		L	Goward		Case number (if known) _	
	First Name	Middle	Name Last Name			
			Description and value of protransferred	perty Describe any prop or debts paid in ex	erty or payments received xchange	Date transfer was made
Person Who	o Received Transfer					
Number	Street					
City	State Z					
erson's re	elationship to you					
n called <i>a</i> ∑ No	D years before you file asset-protection device I in the details.			operty to a self-settled trust or s	imilar device of which you a	re a beneficiary?(Thes
			Description and value of the	property transferred		Date transfer was made
						made
lame of tru	ust					
		ial Acco	unts Instruments Safe	Denosit Royes, and Stora	na Units	
Within 1 ynsferred? lude check operatives,	st Certain Financ year before you filed	for bankru	uptcy, were any financial accou	Deposit Boxes, and Stora Ints or instruments held in your Ites of deposit; shares in banks, cr	name, or for your benefit, cl	osed, sold, moved, or
Within 1 y nsferred? clude check operatives,	st Certain Financ year before you filed king, savings, money	for bankru	uptcy, were any financial accou	nts or instruments held in your	name, or for your benefit, cl	osed, sold, moved, or
Within 1 ynsferred? lude check operatives,	st Certain Financ year before you filed king, savings, money i , associations, and oth	for bankru	uptcy, were any financial accou	nts or instruments held in your letes of deposit; shares in banks, cr	name, or for your benefit, cl	osed, sold, moved, or s, pension funds,
Within 1 ynsferred? lude check operatives, ✓ No ☐ Yes. Fill	st Certain Financ year before you filed king, savings, money i , associations, and oth	for bankru	ptcy, were any financial accounts; certifica linstitutions.	nts or instruments held in your stees of deposit; shares in banks, cruber Type of account or instrument	name, or for your benefit, cle edit unions, brokerage house Date account was closed, sold, moved, or	osed, sold, moved, or s, pension funds, Last balance before closing or
It 8: Lis Within 1 ynsferred? clude check operatives, ✓ No ☐ Yes. Fill	year before you filed king, savings, money i , associations, and oth	for bankru	optcy, were any financial account other financial accounts; certifical institutions. Last 4 digits of account num	nts or instruments held in your stees of deposit; shares in banks, or the stee of deposit; shares in the steet of deposit; shares in the stee of deposit; shares in the stee	name, or for your benefit, cle edit unions, brokerage house Date account was closed, sold, moved, or	osed, sold, moved, or s, pension funds, Last balance before closing or
. Within 1 yansferred? clude check operatives, \(\square \text{Y} \) No \(\square \text{Yes. Fill} \)	year before you filed king, savings, money i , associations, and oth	for bankru	optcy, were any financial account other financial accounts; certifical institutions. Last 4 digits of account num	nts or instruments held in your stees of deposit; shares in banks, or nber Type of account or instrument —	name, or for your benefit, cle edit unions, brokerage house Date account was closed, sold, moved, or	osed, sold, moved, or s, pension funds, Last balance before closing or
nt 8: Lis D. Within 1 yansferred? Clude check operatives, Mo Yes. Fill Name of Fin	year before you filed king, savings, money it, associations, and other than the details.	for bankru	optcy, were any financial account other financial accounts; certifical institutions. Last 4 digits of account num	nts or instruments held in your stees of deposit; shares in banks, or here to be a count or instrument Type of account or instrument Checking Savings Money market Brokerage	name, or for your benefit, cle edit unions, brokerage house Date account was closed, sold, moved, or	osed, sold, moved, or s, pension funds, Last balance before closing or

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1	Steven	L	Goward	Case number (if k	nown)
	First Name	Middle Name	Last Name		
		ı have within 1 year befo	ore you filed for bankruptcy, any	safe deposit box or other depository fo	r securities, cash, or other
valuables?					
√ No					
☐ Yes. F	ill in the details.				
		Who alo	e had access to it?	Describe the contents	Do you still have
		WIIO GIS	e riau access to it:	Describe the contents	it?
					DN-
Name of F	inancial Institution	Name			☐ No ☐ Yes
					163
Number	Street	Number	Street		
Number	Street	Number	Sileet		
				<u>.</u>	
		City	State ZIP Code		
City	State 2	ZIP Code		<u> </u>	
22. Have yo	ou stored property in	a storage unit or place	other than your home within 1 y	year before you filed for bankruptcy?	
√ No					
	ill in the details.				
☐ fes. F	ill in the details.				
		Who els	e has or had access to it?	Describe the contents	Do you still have it?
					□No
Name of S	Storage Facility	Name			Yes
Number	Street	Number	Street		
				_	
		City	State ZIP Code		
City	State 2	ZIP Code			
•					
Part 9: Id	dentify Property	You Hold or Contro	ol for Someone Else		
00 D	1 -11		de la companya de la		Latte de adformações
	noid or control any p	property that someone e	ase owns? include any property	y you borrowed from, are storing for, or	noid in trust for someone.
√ No					
☐Yes. F	fill in the details.				
Official Form 1	107	Stateme	ent of Financial Affairs for Indiv	riduals Filing for Bankruntey	page
oidi 7 Oii11		Cialcin	C. I maneral Andre for Mary	i mig ioi baimapioy	page

otor 1	Steven	_		Goward		Case number (if kno	own)
	First Name	Middle I	Name	Last Nam	ne		·····/
			Where i	is the property?	?	Describe the property	Value
Owner's Nam	ie		Number	Street		_	
Number S	Street						
			City	Sta	te ZIP Code		
City	State Z	ZIP Code					
rt 10: Giv	∕e Details Abou	ut Environ	mental	Information			
r the purpo:	se of Part 10, the f	following de	finitions a	pply:			
						g pollution, contamination, releases of hazardo uding statutes or regulations controlling the cle	
wastes, or	material.						
	s any location, facili disposal sites.	ity, or propert	y as define	ed under any env	vironmental law	, whether you now own, operate, or utilize it or u	ised to own, operate, or utilize i
	s <i>material</i> means ar int, or similar term.	nything an er	nvironment	al law defines as	s a hazardous v	vaste, hazardous substance, toxic substance, ha	azardous material, pollutant,
port all notic	ces, releases, and	proceeding	s that you	know about, re	gardless of wi	nen they occurred.	
. Has any gc	overnmental unit n	notified you t	that you m	nay be liable or	potentially lial	ble under or in violation of an environmental	law?
√No							
_	n the details.						
						Environmental law if you know it	Date of notice
			Cavaran	aantal unit		Environmental law, if you know it	
			Governn	nental unit			Date of Hotice
Name of site							Date of Hotice
Name of site			Governmen				Date of Hotice
	Street						Date of Hotice
	Street		Governme	ntal unit			Date of Hotice
	Street		Governme	ntal unit Street	ZIP Code		Date of Hotice
Number S			Governmei Number	ntal unit Street	ZIP Code		Date of Hotice
Name of site Number S City			Governmei Number	ntal unit Street	ZIP Code		Date of Hotice
Number S			Governmei Number	ntal unit Street	ZIP Code		Date of Hotice
Number S City		ZIP Code	Government Number City	Street State			Date of Hotice
Number S City	State Z	ZIP Code	Government Number City	Street State			
Number S City 5. Have you n	State Z notified any govern	ZIP Code	Government Number City	Street State			Date of Hotice
Number S City 5. Have you n	State Z notified any govern	ZIP Code	Government Number City	Street State			
Number S City 5. Have you n	State Z notified any govern	ZIP Code	Government Number City	Street State			
Number S City 5. Have you n	State Z notified any govern	ZIP Code	Government Number City	Street State			
Number S City 5. Have you n	State Z notified any govern	ZIP Code	Government Number City	Street State			
Number S City 5. Have you n	State Z notified any govern	ZIP Code	Government Number City	Street State			
Number S City 5. Have you n	State Z notified any govern	ZIP Code	Government Number City	Street State			
Number S City 5. Have you n	State Z notified any govern	ZIP Code	Government Number City	Street State			

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

	Steven	L	Goward	Case number (if known	own)
	First Name	Middle	Name Last Name	<u> </u>	,
			Governmental unit	Environmental law, if you know it	Date of notice
Name of site			Governmental unit	_	
varie oi site			Governmental unit		
Number S	Street		Number Street	_	
			City State ZIP Code	-	
City	State ZIF	P Code			
	been a party in any j	judicial or	administrative proceeding under any	environmental law? Include settlements and o	rders.
☑No ☑Yes. Fill i	in the details.				
_			Court or agency	Nature of the case	Status of the case
Case title			Court Name	-	☐Pending
					☐On appeal☐Concluded
			Number Street	-	Concluded
Case number	r		City State ZIP Code	_	
			only only black bill code		
			usiness or Connections to Ang	-	
				ve any of the following connections to any busin	ness?
			n a trade, profession, or other activity, opany (LLC) or limited liability partnershi		
	artner in a partnershi		any (LLC) or inflited liability partiters in	μ (LLF)	
☐ A pa	officer director or ma	anaging ex	ecutive of a corporation		
☐ A pa			ecutive of a corporation		
☐ A pa	owner of at least 5%	of the votin	ng or equity securities of a corporation		
A pa An c An c No. None	owner of at least 5% e of the above applies	of the votin	ng or equity securities of a corporation rt 12.		
A pa An c An c No. None	owner of at least 5% e of the above applies	of the votin	ng or equity securities of a corporation at 12. the details below for each business.	Fmployer Identification n	ımher
☐ A pa ☐ An c ☐ An c ☐ No. None ☐ Yes. Che	owner of at least 5% e of the above applies	of the votin	ng or equity securities of a corporation rt 12.	Employer Identification nu Do not include Social Sec	ımber urity number or ITIN.
A pa An c An c No. None	owner of at least 5% e of the above applies	of the votin	ng or equity securities of a corporation at 12. the details below for each business.	EIN:	urity number or ITIN.
☐ A pa ☐ An c ☐ An c ☐ No. None ☐ Yes. Che	owner of at least 5% e of the above applies	of the votin	ng or equity securities of a corporation at 12. the details below for each business. Describe the nature of the busine	Do not include Social Sec	urity number or ITIN.
☐ A pa ☐ An c ☐ An c ☐ No. None ☐ Yes. Che	owner of at least 5% e of the above applies eck all that apply abov	of the votin	ng or equity securities of a corporation at 12. the details below for each business.	Do not include Social Sec	urity number or ITIN.
☐ A pa ☐ An c ☐ An c ☐ No. None ☐ Yes. Che	owner of at least 5% e of the above applies eck all that apply abov	of the votin	ng or equity securities of a corporation at 12. the details below for each business. Describe the nature of the busine	Do not include Social Sec	urity number or ITIN.

Statement of Financial Affairs for Individuals Filing for Bankruptcy

btor 1	Steven	L	Goward	Case number (if known)
	First Name	Middle Name	Last Name	
00 Mideleier 0				
8. Within 2 or other pa		led for bankruptcy, did	you give a financial statement to	anyone about your business? Include all financial institutions, creditors,
✓No				
Yes. F	ill in the details below	v.		
		Date is:	sued	
Name		MM / DD /	YYYYY	
Number	Street			
City	State	ZIP Code		
art 12: 5	Sign Below			
I have read correct. I ur	Sign Below the answers on this derstand that maki	Statement of Financia		d I declare under penalty of perjury that the answers are true and noney or property by fraud in connection with a bankruptcy case §§ 152, 1341, 1519, and 3571.
have read	Sign Below the answers on this derstand that maki	Statement of Financia	oncealing property, or obtaining n	noney or property by fraud in connection with a bankruptcy case
have read	Sign Below the answers on this nderstand that maki n fines up to \$250,00	Statement of Financia ng a false statement, c 00, or imprisonment for	oncealing property, or obtaining n up to 20 years, or both. 18 U.S.C.	noney or property by fraud in connection with a bankruptcy case
have read correct. I ur can result ii	Sign Below the answers on this nderstand that maki n fines up to \$250,00	Statement of Financia ng a false statement, c 10, or imprisonment for ven L Goward	oncealing property, or obtaining n up to 20 years, or both. 18 U.S.C.	noney or property by fraud in connection with a bankruptcy case § 152, 1341, 1519, and 3571.
have read correct. I uncan result in	the answers on this derstand that making fines up to \$250,000 /s/ Steventure of Steven L Government	Statement of Financia ng a false statement, c 10, or imprisonment for ven L Goward	oncealing property, or obtaining n up to 20 years, or both. 18 U.S.C.	noney or property by fraud in connection with a bankruptcy case § 152, 1341, 1519, and 3571.
I have read correct. I ur can result in	Sign Below the answers on this derstand that maki n fines up to \$250,00	Statement of Financia ng a false statement, c 10, or imprisonment for ven L Goward	oncealing property, or obtaining n up to 20 years, or both. 18 U.S.C.	noney or property by fraud in connection with a bankruptcy case
I have read correct. I ur can result in Signa	the answers on this iderstand that makin fines up to \$250,000 /s/ Steventure of Steven L Gov.	Statement of Financia ng a false statement, c 10, or imprisonment for ven L Goward vard, Debtor 1	oncealing property, or obtaining n up to 20 years, or both. 18 U.S.C.	noney or property by fraud in connection with a bankruptcy case
I have read correct. I ur can result in Signa Date	the answers on this iderstand that makin fines up to \$250,000 /s/ Steventure of Steven L Gov.	Statement of Financia ng a false statement, c 10, or imprisonment for ven L Goward vard, Debtor 1	oncealing property, or obtaining n up to 20 years, or both. 18 U.S.C.	noney or property by fraud in connection with a bankruptcy case
have read correct. I uncan result in Signa Date	the answers on this iderstand that makin fines up to \$250,000 /s/ Steventure of Steven L Gov.	Statement of Financia ng a false statement, c 10, or imprisonment for ven L Goward vard, Debtor 1	oncealing property, or obtaining n up to 20 years, or both. 18 U.S.C.	noney or property by fraud in connection with a bankruptcy case
I have read correct. I ur can result in Signa Date	the answers on this iderstand that makin fines up to \$250,000 /s/ Steventure of Steven L Gov.	Statement of Financia ng a false statement, c 10, or imprisonment for ven L Goward vard, Debtor 1	oncealing property, or obtaining n up to 20 years, or both. 18 U.S.C.	noney or property by fraud in connection with a bankruptcy case
have read correct. I uncan result in Signal Date Did you atta	the answers on this derstand that making fines up to \$250,000 /s/ Steven L Government of St	Statement of Financia ng a false statement, c 10, or imprisonment for ven L Goward ward, Debtor 1	oncealing property, or obtaining n up to 20 years, or both. 18 U.S.C.	noney or property by fraud in connection with a bankruptcy case §§ 152, 1341, 1519, and 3571.
I have read correct. I ur can result in Signal Date	the answers on this derstand that making fines up to \$250,000 /s/ Steven L Government of St	Statement of Financia ng a false statement, c 10, or imprisonment for ven L Goward ward, Debtor 1	oncealing property, or obtaining n up to 20 years, or both. 18 U.S.C.	noney or property by fraud in connection with a bankruptcy case §§ 152, 1341, 1519, and 3571.

UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF MICHIGAN

In Re:	Goward, S	Steven L			Case No.					
		De	ebtor(s).		Chapter	13				
			/		Hon.					
				ENT OF ATTORNEY	` '					
The und	ersigned, pu	ursuant to	F.R.Bankr.P. 2016(b), sta	ates that:						
1.	The ur	ndersigned is the attorney for the Debtor(s) in this case.								
2.	The co	The compensation paid or agreed to be paid by the Debtor(s) to the undersigned is: [Check one]								
	abla	FLAT I	<u>FEE</u>							
	A.		-	-	I in connection with this ca	se, exclusive of the filing fee paid \$3,500.00				
	В.	Prior t	o filing this statement, re \$400.00	eceived						
	C.	The ur	npaid balance due and pa 3,100.00	ayable is						
		RETAI	NER							
	A.	Amou	nt of retainer received							
	В.		ule.] Debtor(s) have agre		hourly rate of pproved fees and expense	Or attach firm hourly rate sexceeding the amount of the				
3.		\$0.00	of the filing fee has b	been paid.						
4.		In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: [Cross out any that do not apply.]								
	Α.		sis of the debtor's financi n in bankruptcy;	ial situation, and rend	ering advice to the debtor	in determining whether to file a				
	B.	Prepa	ration and filing of any pe	etition, schedules, sta	atement of affairs and plan	which may be required;				
	C.	Repre therec		t the meeting of credi	tors and confirmation hear	ng, and any adjourned hearings				
5.	By agr	agreement with the debtor(s), the above-disclosed fee does not include the following services:								
6.	6. The source of payments to the undersigned was from:									
	A.		Debtor(s)' earnings, v	wages, compensation	for services performed					
	B.		Other (describe, inclu	uding the identity of p	ayor)					
7.			d has not shared or agree oration, any compensatio			th members of the undersigned's				
Dated: _		01/0	09/2019		/s/ James L Gutting					
				James L G	Butting, Attorney for the De	btor(s)				

Agreed: /s/ Steven L Goward
Steven L Goward, Debtor

IN THE UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF MICHIGAN BAY CITY DIVISION

IN RE: Goward, Steven L CASE NO

CHAPTER 13

VERIFICATION OF CREDITOR MATRIX

The a	above named Debtor h	nereby verifies tha	at the attached list of creditors is true and correct to the best of his/her knowledge.
Date _	01/09/2019	Signature _	/s/ Steven L Goward Steven L Goward, Debtor

Capital One

Po Box 30281 Salt Lake City, UT 84130

Cr Srvs Of Michigan 1982 Hemmeter St

Saginaw, MI 48603

ERC/Enhanced Recovery Corp

8014 Bayberry Rd Jacksonville, FL 32256

Internal Revenue Service

Special Procedures Branch PO Box 7346 Philadelphia, PA 19101

Trott Law, PC 31440 Northwestern Hwdy Set 145 Farmington Hills, MI 48334

US Attorney

Attn: Civil Division 600 Church Street Flint, MI 48502

Wells Fargo Home Mortgage Po Box 10335 Des Moines, IA 50306